

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on April 21, 2003.

I. DISPUTE

Whether there should be reimbursement for CPT Codes 25000 and 25000-51 for date of service April 8, 2002.

II. RATIONALE

- CPT Code 25000 and 25000-51 denied as “G – Included in the global charge”. The primary procedure listed on the operative report is an Osteotomy distal radius, CPT code 25350. The CPT descriptor, according to the GSDOS, describes the disputed procedure as a tendon sheath incision. Per the 1994 Global Service Data for Orthopedic Surgery, pg. 94, the disputed CPT code is considered global to the primary procedure. Reimbursement is not recommended.

III. DECISION

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor is not entitled to reimbursement for CPT code 25000 and 25000-51.

The above Findings and Decision is hereby issued this 15th day of April 2004.

Marguerite Foster
Medical Dispute Resolution Officer
Medical Review Division

MF/mf